

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)

X2007.0063/P063

11/13/2003 09:59:1239

01 FC:1253

530.00 DP

In re Application of Yoshihiro Hirano, et al.

Application Number
09/591,239-Conf. #3197

Filed
June 9, 2000

For: METHOD FOR MANUFACTURING LIGNEOUS MATERIAL

Art Unit 1714

Examiner C. Shosho

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | | | |
|-------------------------------------|--|----|----------|
| <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ | |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ | |
| <input checked="" type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) (Two Mo. Ext Paid 10/14/03 (\$950.00 - \$420.00 =)) | \$ | \$530.00 |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ | |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ | |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2215.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number _____

☒ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) _____

November 12, 2003

Date

(212) 896-5484

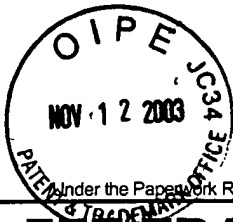
Telephone Number

Richard LaCava
Signature

Richard LaCava
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.



11-12-03

AF 11714 \$

Approved for use through 7/31/2006. PTO/SB/17 (10-03) OMB 0651-0032
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FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/591,239-Conf. #3197
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	June 9, 2000
530.00		First Named Inventor	Yoshihiro Hirano
		Examiner Name	C. Shosho
		Art Unit	1714
		Attorney Docket No.	X2007.0063/P063
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input type="checkbox"/> Deposit Account: Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP		Large Entity Small Entity	
The Director is authorized to: (check all that apply)		Fee Code Fee (\$)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		Fee Code Fee (\$)	
<input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)		Fee Description	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		Fee Paid	
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Small Entity			
Fee Code Fee (\$)		Fee Code Fee (\$)	
Fee Description		Fee Paid	
1001 770 2001 385 Utility filing fee			
1002 340 2002 170 Design filing fee			
1003 530 2003 265 Plant filing fee			
1004 770 2004 385 Reissue filing fee			
1005 160 2005 80 Provisional filing fee			
SUBTOTAL (1) (\$)		0.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims -20** = Extra Claims Fee from below Fee Paid			
Independent Claims -3** =			
Multiple Dependent			
Large Entity Small Entity			
Fee Code Fee (\$)		Fee Code Fee (\$)	
Fee Description		Fee Paid	
1202 18 2202 9 Claims in excess of 20			
1201 86 2201 43 Independent claims in excess of 3			
1203 290 2203 145 Multiple dependent claim, if not paid			
1204 86 2204 43 ** Reissue independent claims over original patent			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)		0.00	
**or number previously paid, if greater; For Reissues, see above			
		Other fee (specify)	
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) (\$)	
		530.00	
SUBMITTED BY		(Complete if applicable)	
Name (Print/Type) Richard LaCava		Registration No. 41,135	
Signature Richard LaCava		Telephone (212) 896-5484	
		Date November 12, 2003	